

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 14
Registered No. 37

1. PLACE OF BIRTH
County Apache State Arizona
District or Township Piney on or Village _____
City _____ No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Albert Glen Penrod (If child is not yet named, make supplemental report, as directed.)

3. Sex of Child Male To be answered ONLY in event of plural births. 4. Twin, triplet or other. _____ 5. No., in order of birth. _____ 6. Legitimate? Yes 7. Date of birth Oct 26th 1925
Month Day Year

8. FATHER
Full name Georgel Dell Penrod
9. Residence (Usual place of abode) Piney on Ariz
If non-resident, give place and state.
10. Color or race White 11. Age at last birthday 28 (Years)

14. MOTHER
Full maiden name Temperance Edenis Gillespie
15. Residence (Usual place of abode) Piney on Ariz.
If non-resident, give place and state.
16. Color or race White 17. Age at last birthday 25 (Years)

12. Birthplace (city or place) Pinetop
(State or country) Ariz
13. Occupation farmer
Nature of industry

18. Birthplace (city or place) Clifton Ariz
(State or country)
19. Occupation Housewife
Nature of industry

20. Number of children of this mother. Three (Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living Three
(b) Born alive but now dead 0
(c) Stillborn _____

21. Were precautions taken against ophthalmia neonatorum? No

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was alive at 2 1/2 p.m. on the date above stated
(Born alive or stillborn.)

* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature Georgel Dell Penrod Father
(Physician or midwife)

Given name added from a supplemental report 174-1026 Address Piney on Arizona
Month, day, year

Filed Nov 23rd 1925 H A Nichols
Registrar

Registrar

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.

MAKING RESERVE FOR MATERIAL